

DSCYF Guidelines for Reporting Critical Incidents – Policy #211 Criteria Information

The Department's formal definitions for *critical incidents* are shown in the shaded areas. Below these definitions are points of clarification to promote consistent reporting practices across divisions.

I. Child Deaths:

The loss of life of any children who is active with the Department or has been active within 12 months preceding his or her death.

- Includes the death of any child served in both department operated and contracted programs.
- Includes any child with an open case in FOCUS with DFS, DPBHS, or DYRS at the time of the incident, and any child who had an open FOCUS case within 12 months prior to his or her death.
 - Includes DFS contracted investigations or assessments.
 - Includes DYRS Community Services cases open with a provider program for supervision and case management (Back on Track, Wraparound Delaware, Community Supervision and Resource Connection Program) and youth open for technical assistance.
- The following are not included in this definition:
 - Child with an active status at the time of the incident, or within 12 months prior to the incident, with only:
 - A DFS Assistance/Subsidy Case
 - A screened out DFS intake report
 - DPBHS Office of Prevention programming
 - K-5 Early Intervention Program
 - Deaths occurring as a result of the injury or condition resulting in initiation of a DFS investigation and where the child was not otherwise active with the Department at the time of the incident or during the year preceding the child's death.

II. Hospitalizations

An emergency hospital admission of a child active with the Department in any 24-hour department-operated or contracted program, including foster care, for:

1. Medical or psychiatric hospital admission, including emergency department admission, as a result of an attempted suicide.
 2. Medical or psychiatric hospital admission where a referral is made to the child abuse and neglect report line for suspected abuse and neglect.
- In this policy *24 hour department-operated or contracted program* refers to residential programs and residential care, including foster care.
 - Attempted suicide assumes an attempt so serious the physical consequences/injury results in hospitalization for medical treatment or there was potential for serious injury as a result of the suicide attempt. *Report any attempted suicide resulting an emergency room admission.*
 - Suicide threats, suicidal ideation, or planning a suicide are not considered attempted suicide.
 - Emergency admission does not need to be made through the emergency room
 - Youth in residential programs through the Interagency Collaborative Team (ICT) are not included in the definition of *24 hour department-operated or contracted program*.
 - Hospitalizations for chronic illnesses/conditions and anticipated hospital admissions for treatment are not reported to Safety Council, only those that are a result of an attempted suicide or result in a referral to the child abuse and neglect report line.

III. Repeat Psychiatric Hospital Admissions

When a youth in department care has experienced a third psychiatric inpatient hospitalization and the third admission is 90 days or fewer since discharge from the first inpatient hospital admission.

- Includes all children in department operated or contracted 24-hour care, including residential programs and foster care as defined in above in item II.
- Refer at the point of the 2nd subsequent psychiatric hospitalization within 90 days after discharge from psychiatric inpatient hospitalization.

IV. Escape from a Level V Program

The unauthorized departure from any Level V DYRS program.

- Includes Ferris School, New Castle County Detention Center, Stevenson House Detention Center, and any contracted level V program (either in-state or out-of-state).
- Report the incident even if the youth subsequently returned to the program.

V. Stabbing and/or Shooting Incident

An incident in which any child active in a department operated or contracted program is involved as the victim or alleged perpetrator of a stabbing or shooting.

- In this policy, *child active with the Department* includes any child with an open case in FOCUS (the division active with the child when the critical incident occurs should report the critical incident).
 - Includes DFS contracted investigations or assessments.
 - Includes DYRS Community Services cases that are open with a provider program for the purpose of supervision and case management (Back on Track, Wraparound Delaware, Community Supervision and Resource Connection Program) and youth open for technical assistance.
- Children with an active status in only the below programs or case types at the time of the incident are excluded from this definition:
 - DFS Assistance/Subsidy Cases
 - A screened out DFS intake report
 - DPBHS Office of Prevention programming
 - K-5 Early Intervention Program
- If the victim(s) and perpetrator(s) are each active with the Department, a separate critical incident is required for each individual. The incident should include their individual and case history information.

VI. Special Incident

An incident that does not fall within the definition of a departmental Critical Incident, but is of concern and referred to the Safety Council for review.

- This can include any incident involving any child or family with a current or previous open case in a DSCYF division.
- Incidents are referred by the Cabinet Secretary, division directors, or any safety council representative.
- Institutional Abuse may refer incidents following investigation of an institutional abuse complaint when system issues are identified or there are concerns that potential system issues exist.
 - The allegations must involve an employee or provider of the department and include allegations of maltreatment of a child active with the Department.